### **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filou Taloutificati		6060	2			D <sub>O</sub>	port		CANDI	DATE	./	CO	MMITTEE		LOBE	SYIST		
Filer Identificati Number :	on 	60600	) 				ed B				<b>Y</b>							
Name of Filing C	committee	e, Candida	ate or Lo	obbyist:		Lisa	a Bal	ker										
Street Address:																		
City:									State:				Zip Code	2:				
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3. <b>X</b>		AMENDME REPORT?	NT	Yes	No	•	<b>/</b>
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRIDATELECTION	y pri	E-	5.	30 DA ELECT		POST-	6.		TERMINAT REPORT?	TION	Yes	No	•	<b>/</b>
report type)	ANNUAL	REPORT	7.	<b>Year</b> 2006					IG METHO				PAPER		/	DISKE	TTE	
Name of Office S	L Sought by	Candidat	:e:						DATE 0	F ELE	CTION		District Number	Office Code	Par	ty Code	Coun	
	ought by	Cumunuu							МО	DAY	YEA	R	20	STS	REP		40	
SENATOR IN TH	HE GENEI	RAL ASSE	MBLY						11		7 2	2006		(SEE INS	TRUCTIO	ONS FOR (	CODES)	
Summary of	Receipts	and	МО	DAY	YEAR	2			МО	DAY	YEA	R	FOR	OFFIC	E USE	ONLY		
Expenditures	from:			1 1		1	T	0	6	5	5 2	2006						
A. Amount Bro	ught Forv	vard From	ı Last R	eport				\$			(1,964	.74)						
B. Total Moneta	ary Contri	ibutions A	and Rec	eipts (From	Sche	dule	e I)	\$			ı	0.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$			(1,964	.74)						
D. Total Expend	ditures (F	rom Sche	dule II	I)				\$			5,000	0.00						
E. Ending Cash	Balance	(Subtract	Line D	From Line (	C)			\$			(6,964	.74)						
F. Value Of In-	Kind Cont	tributions	Receive	ed (From S	chedu	le I	I)	\$			(	0.00						
G. Unpaid Debt	s And Ob	ligations	(From S	Schedule IV	')			\$			(	0.00						
					AFF	·ID/	AVI	T SE	CTION									
PART I - If this is	s a Comm	ittee repo	ort, trea	surer sign	here.	If th	nis is	a Can	ididate r	eport, o	candida	te sig	ın here.					
I swear (or affirm) correct and comple		report, incl	uding the	attached scl	hedule	s file	d on	paper (	or by elect	tronic m	edium, a	re to t	he best of	my know	/ledge a	and beli	ef , tru	ıe
Sworn to and subs	cribed befo	ore me this		20							Sig	nature	of Person	Submitti	ing Rep	ort		-
		Signatur	e					- -					Printe	ed Name				-
My Commission Ex	cpires							_					Email					_
		МО	D/	AY	YR					Are	ea Code		Daytime	Telepho	one Nu	mber		
Part II- If this is	a report	of a cand	idate's	authorized	Comn	nitte	ee, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and beli	ef this	poli	itical	commi	ittee has n	not viola	ted any p	orovis	ions of the	act of Ju	ne 3,19	937 (P.L	. 1333	3,
Sworn to and subsc		re me this										s	ignature of	Candida	te			-
	day of —							_					Printed	Name				-
	9	Signature						-										_ [
My Commission Exp		-											Email					
	_	мо	D/	AY	YR	<b>1</b>		-		Area	Code		Day	rtime Te	lephon	e Numb	er	<i>-</i>

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period		
Lisa Baker	From:	То:	<u>6/5/2006</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	Period (1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)			
Contributions Received From Political Committees (Part A)		\$	0.00
All Other Contributions (Part B)	\$	0.00	
TOTAL for the Reporting	Period (2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)			
Contributions Received From Political Committees (Part C)		\$	0.00
All Other Contributions (Part D)		\$	0.00
TOTAL for the Reporting	Period (3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reporting	Period (4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa	d enter amount ge, Item B.)	\$	0.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee	Reporting Period						
		F	rom:		То	I	
		•		DATE			AMOUNT
Full Name of Contributing Co	ommittee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

### **PART B ALL OTHER CONTRIBUTIONS**

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Comm	nittee or Candidate		Reporting	Period			
	From: To:					<b>)</b> :	
		•		DATE			AMOUNT
Full Name of Contribut	or		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
							PAGE TOTAL

#### **PART C**

### **Contributions Received From Political Committees**

**OVER \$250.00** 

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate	Reporting Period							
			From:			То:		
				DA	TE		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							<b>-</b>   \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

### ALL OTHER CONTRIBUTIONS

**OVER \$250.00** 

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	Reporting Period							
			Fror	n:		To	):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupation				
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 0.00

## OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee of	or Candidate		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							$\neg$	
City	State	Zip Code (I	Plus 4)					
Receipt Description	•	•			1	•	•	
Futor Coand Total of Bank	Cabadula I Detailed	Commence De	Caatle					PAGE TOTAL
Enter Grand Total of Part I	e on Schedule I, Detailed	Summary Page,	Section	4.			\$	0.00

#### **SCHEDULE II**

### **IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
Lisa Baker	From:	То:	<u>6/5/2006</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Car	Reporting Period							
	From:		To	То:				
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$	C	0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pa	ge,		PAGE TOTAL	
Section 2.						\$	0	.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candida	Name of Filing Committee or Candidate				porting	Period			
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor	1		1		Occup	ation			
Employer Mailing Address/Principal Place of Business City				Stat	e Zi <sub>l</sub>	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on So	chedule II. In-K	ind	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.	<b>, -</b>	_							0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Commi	Reporting Period						
Lisa Baker	From			То:	<u>6/5/2006</u>		
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Baker for Senate Com	mittee						
Mailing Address 10	95 Mountain View Drive		5	3	2006	\$	5,000.00
City Dallas	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	18612	Loan to	Committe	е		
							PAGE TOTAL
Enter Grand Total o	f Expenditures on Page 1, Report C	over Page, Item D	).			\$	5,000.00